State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,

500 E Capitol Ave, Pierre, SD 57501-5070

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See pages 9 & 10 of the Guidelia completing this report.	ne Book for specific instructions on
Name of Candidate or Committee	McCook County Democrats
Complete Mailing Address	
Name of Person Making Report	Alken Wegener Phone 605-425-272:
If you are a candidate, what of	fice are you seeking
If you are a ballot question concommittee was involved with during measure was supported or opposed	mmittee, indicate which measure(s) the ing the reporting period and whether the d.
Type of Report (See pages 4 & 5	of Guideline Book) Year End Report
For Reporting Period Ending (Sec	e pages 4 & 5 of Guideline Book) /2-3/-6/
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The following verification must be com	pleted before submitting report.
The following verification must be computed to the computer of	-
VERIFICATION OF PERSON MAKING RI	EPORT
verification of person making ri i <u>Allen Wegener</u>	EPORT (print name legibly), certify
verification of person making ri i <u>Allen Wegener</u>	(print name legibly), certify and to the best of my knowledge and

SECRETARY OF STATE

Name	e of	Candidate	or Committee _	McCook County Democrats	
For	the	reporting	period ending_	12-31-01	

Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

nitemized Contribution	*\$ -0-						
temized Contributions from Individuals							
Name	Residence Address	Place of Employmen (Name of Employer)	t				
			\$				
			\$				
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			\$				
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			\$				

Name of Candidate or Committee	McCook County Dem	ocrats
For the reporting period ending_	12-31-01	
	ect Contributions (continued)	
Unitemized Contributions from Pol	litical Parties:	*\$
Itemized Contributions from Polit	tical Parties	
Party Name	Address	
		\$
		\$
Total of Itemized Contributions	from Political Parties:	*\$
Itemized Contributions from Police (All contributions from Page Name	AC's must be itemized.) Address	
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Itemized Contributions fro	om Political Action Committe	es: *\$ _ O ~
Total of All Direct Contribution	ng (Sum of all lines with an	*) \$ -0-

Name	of	Car	ndida	te	or (Comm	itte	e _	n)c(Zoo k	<u> </u>	oun	+4	D	emi	CV	ra	<i>t</i> s		
For											31-0			7							
				S	che	edul	е В -	- Fu	nd-l	Rais	ing E	Eve	nts I	Proc	ceed	ds					
List or derive aggreg	d fro	om ea	ich eve	ent.	If a c	contri	butor	gives	mor	e than	\$100	or th	heir c	ontrib	butio	n resu	lts in	n th	eir	le A.	
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Report exceed Natu :	ls \$1	.00, t	he nan	ne of	oution the	ns of contri	goods ibutor	or se	rvice	s and addr	the e	stima d pla	ted fa	ir ma empl	arket loym	value ent m	ust b	e r	eport	ed.	tor
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exceed	ls \$1	.00, t	he nan	ne of	oution the	ns of contri	goods ibutor	or se	rvice	s and addr	the e	stima d pla	ited fa	ir ma empl	arket loym	ent m	ust b	e r	eport	ed.	tor
exceed	ls \$1	.00, t	he nan	ne of	oution the	ns of contri	goods ibutor	or se	rvice	s and addr	the e	stima d pla	ited fa	ir ma empl	arket loym	ent m	ust b	e r	eport	ed.	tor
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exceed	ls \$1	.00, t	he nan	ne of	oution the	ns of contri	goods ibutor	or se	rvice	s and addr	the e	stima d pla	ited fa	ir ma empl	arket loym	ent m	of	c C	eport	ed.	tor
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Source of Income

Amount

Total: \$ - 0-

Name	of	Candidate	or Com	mittee _	McCook	County	Democrats	
For	the	reporting	period	ending_	12-31-0		_	

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Item	Amount	Contributions	Made	to	Candidates	and	Committees:
Advertising	******						
Consulting							
Postage							
Printing							
Rent							
Salaries							
Telephone							
Travel							
Utilities							
Other Expens	es:						

Total Expenditures: \$ _______

Name	of	Candidate	or Committee	McCook County Democrats
Ифте	. 01	Canaraaco	-	
For	the	reporting	period ending	12-31-01

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed To

Purpose

Amount

Total Obligations: \$ ______

Name	e of Candidate or Committee $\underline{\mathcal{MCC}}$	Ook County Des	nocrats				
	the reporting period ending /2-3	J					
	Summary Page						
	This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.						
1.	Amount on hand, if any, at beginning	of reporting period	\$ 156,38				
2.	Receipts						
	Schedule A - Direct Contributions	\$					
	Schedule B - Fund-Raising Events	\$					
	Schedule C - In Kind Contributions	\$					
	Schedule D - Other Income	\$					
	Total of all receipts	\$					
3.	Total Monetary Receipts (A+B+D)		\$				
4.	Candidate's Personal Contribution to	Own Campaign	\$				
5.	Monetary Loans to Candidate or Commit	ttee During	\$				
6.	Monetary Loans Repaid During Reporting	ng Period	\$				
7.	Expenditures - Schedule E		\$				
8.	Unpaid Obligations - Schedule F	\$					
9.	Amount on hand at the close of this : This should equal lines (1+3+4+5)-(6-	reporting period. +7)	s 156,38				